

State Of Utah

DEPARTMENT OF COMMERCE

Division of Securities

160 East 300 South
P.O. Box 146760
Salt Lake City, Utah 84114-6760
801/530-6600
Fax-530-6980

BD/ADVISER COMPLAINT

DISPOSITION:

" Not Assigned
" Investigator:
" Case #:

COMPLAINT FORM

Please complete this form and attach any documents (ie. photo copies of account statements, transaction confirmations, any correspondence or notes from conversation) that may be pertinent to your complaint. If you have any questions or need assistance in completing this form, feel free to contact the Division of Securities. We will proceed with a preliminary review as soon as this form is returned.

PERSONAL INFORMATION

A broker or investment advisor has a fiduciary responsibility to provide investments which are suitable to your personal financial needs. The personal financial information you provide will be treated as confidential by the Division, but will be subject, in certain instances, to disclosure as provided by law. The Division may disclose the substance of your complaint to those responsible for answering the claims made by you.

LAST NAME	FIRST	M.I.
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HOME ADDRESS	CITY, STATE	ZIP	PHONE
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BUSINESS ADDRESS	CITY, STATE	ZIP	PHONE
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Please check applicable boxes (as of the time of investment):

<u>Age</u>	<u>Net Worth (exclusive of home)</u>	<u>Net Income</u>	<u>Tax Bracket</u>
<input type="checkbox"/> 65 or Older	<input type="checkbox"/> \$0-50,000	<input type="checkbox"/> \$0 -20,000	<input type="checkbox"/> 0%
<input type="checkbox"/> 45 to 65	<input type="checkbox"/> \$50,000 - 100,000	<input type="checkbox"/> \$20,001 - 50,000	<input type="checkbox"/> 15%
<input type="checkbox"/> 31 to 44	<input type="checkbox"/> \$100,000 - 250,000	<input type="checkbox"/> \$50,001 - 100,000	<input type="checkbox"/> 28%
<input type="checkbox"/> 18 to 30	<input type="checkbox"/> \$250,000 - 500,000	<input type="checkbox"/> \$100,001 - 250,000	<input type="checkbox"/> 36%
<input type="checkbox"/> Business	<input type="checkbox"/> >\$500,000	<input type="checkbox"/> > \$250,000	<input type="checkbox"/> 39.6%

INVESTMENT INFORMATION

BROKERAGE OR INVESTMENT ADVISOR FIRM

BROKER/REPRESENTATIVE

ACCOUNT #

BRANCH ADDRESS

CITY, STATE

Z I P

PHONE

Please check applicable boxes (as of the time of investment):

<u>Account Type</u>	<u>Prior Trading Experience</u>	<u>Investment Objective (Please Rank)</u>	<u>Liquidity Time Horizon</u>
<input type="checkbox"/> Tax Deferred	<input type="checkbox"/> Stocks	<input type="checkbox"/> Safety of Principle	<input type="checkbox"/> 0 - 6 Months
<input type="checkbox"/> Regular Acct.	<input type="checkbox"/> Bonds	<input type="checkbox"/> Tax Free Income	<input type="checkbox"/> 6 - 12 Months
<input type="checkbox"/> Custodial	<input type="checkbox"/> Mutual Funds	<input type="checkbox"/> Income	<input type="checkbox"/> 1 - 2 years
<input type="checkbox"/> Options	<input type="checkbox"/> Options	<input type="checkbox"/> Growth	<input type="checkbox"/> 2 - 5 years
<input type="checkbox"/> Margin	<input type="checkbox"/> Commodities	<input type="checkbox"/> Trading	<input type="checkbox"/> 5 - 10 years
	<input type="checkbox"/> Foreign Securities	<input type="checkbox"/> Speculation	<input type="checkbox"/> > 10 years

Type of Investments Made:

(Please check the box for applicable investments made)

Bonds:

- | | |
|---|---|
| <input type="checkbox"/> Money Market | <input type="checkbox"/> Tax Free Muni (A rated or higher) |
| <input type="checkbox"/> U.S. Gov. T-Bills | <input type="checkbox"/> Tax Free Muni (Baa rated or lower) |
| <input type="checkbox"/> U.S. Gov. Notes | <input type="checkbox"/> Corporate Bonds (A rated or higher) |
| <input type="checkbox"/> U.S. Gov. Bonds | <input type="checkbox"/> Corporate Bonds (Baa rated or lower) |
| <input type="checkbox"/> U.S. Gov. Agency Bonds | <input type="checkbox"/> Convertible Bonds |

Stock:

- ☐ Preferred Stock
- ☐ Blue Chip Stock (eg. IBM)
- ☐ Small Cap Stock (NASD Mkt.)
- ☐ International Stock

Speculation

- ☐ Options
- ☐ Short Sales
- ☐ Penny Stock
- ☐ Precious Metals
- ☐ Commodities

Mutual Funds & Partnerships:

- ☐ Gov. Bond Funds
- ☐ GNMA Bond Fund
- ☐ Tax Free Muni Bond Fund
- ☐ Corporate Bond Fund
- ☐ Corp. Junk Bond Fund
- ☐ Blue Chip Stock Fund
- ☐ Growth Stock Fund
- ☐ Balanced Fund (Stocks & Bonds)
- ☐ International Stock Fund
- ☐ International Bond Fund
- ☐ Limited Partnerships

General Questions:

Yes No N/A

- | | | | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Were purchases in the account solicited, or recommended by the broker? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Were trades made in your account without your authorization? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Did you receive a prospectus prior to the purchase of a mutual fund, limited partnership, or an initial public offering? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Was investment risk discussed prior to purchase? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Do you feel the purchases were in line with your investment goals? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Did you have the financial ability to absorb the risk of the investment? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Did you understand the risks of the investment? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Was your account margined? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Did your broker or investment advisor have power of attorney? |

Nature of Complaint: Explain in your own words what you think was done wrong. How do you feel you have been injured by the acts of your broker or advisor? What was done? Who was involved? The date or period of time the problem arose? (if further space is required please enclose an attachment)

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

Were any other persons present when the investment opportunity was explained to you?
(Please list their names and addresses)

NAME	HOME ADDRESS	CITY, STATE	ZIP	PHONE
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NAME	HOME ADDRESS	CITY, STATE	ZIP	PHONE
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Do you know of anyone else who has invested in the same company or business, or who invested through the same salesperson?

NAME	HOME ADDRESS	CITY, STATE	ZIP	PHONE
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NAME	HOME ADDRESS	CITY, STATE	ZIP	PHONE
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Transactions in Question:

If the entire account is in question or there have been more than 5 questionable trades, please enclose account statements with the questionable trades marked.

Date of Purchase	Investment	Shares/Units Invested	Amount Invested	Gain Loss
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Yes No

- ☐ ☐ Have you filed a complaint with the brokerage or investment advisory firm in question?
- ☐ ☐ Have you filed this complaint with any other agency? (Securities and Exchange Commission, National Association of Securities Dealers, Inc. NASD, Police, Better Business Bureau) PLEASE SPECIFY: _____
- ☐ ☐ Have you obtained legal council? PLEASE SPECIFY: _____

Please attach copies of all documents to help us better understand your complaint.

PLEASE SIGN AND DATE:

SIGNATURE

DATE

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS FORM.